G	ill in this info	ormation to iden	tify your case:			Check as o	directed in lines 1	7 and 21:
D	ebtor 1	Arlene		Glover		According to	the calculations require	ed by this
		First Name	Middle Name	Last Name		Statement:		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name			ble income is not deter U.S.C. § 1325(b)(3).	rmined
		nkruptcy Court for the	EASTERN DIST	. OF PENNSYL	/ANIA		ble income is determin U.S.C. § 1325(b)(3).	ned
	ase number	18-17780ELF13				3. The com	mitment period is 3 ye	ears.
1	f known)				-		mitment period is 5 ye	
Oi	fficial Form	122C-1				☐ Check if th	nis is an amended filin	g
		Statement of \	/our Current	Monthly Inc	come			
		tion of Comm			COIIIE			12/15
infe	ormation applie	space is needed, att s. On the top of any culate Your Ave	additional pages,	write your name				
1.	What is your	marital and filing sta	tus? Check one or	nly.				
	Not married. Fill out Column A, lines 2-11.							
	Married. Fill out both Columns A and B, lines 2-11.							
	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.							
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	_	ages, salary, tips, boroll deductions).	onuses, overtime,	and commissions		\$3,468.00		
3.	Alimony and	maintenance payme	nts. Do not include	e payments from a	spouse.	\$0.00		
4.	expenses of y regular contrib your depender	rom any source whice whice the control or your dependentions from an unmaints, parents, and room of include payments y	nts, including child ried partner, memb nmates. Do not incl	d support. Include ers of your househ	old,	\$0.00		
5.	Net income fr	om operating a busi	ness, profession,	or farm				
			Debtor 1	Debtor 2				
	Gross receipts deductions)	s (before all	\$0.00		-			
	,	necessary operating	\$0.00		- Cony			
	•	come from a busines farm	s, \$0.00		Copy here →	\$0.00		

Deb	tor 1	Arlene Glover				Case number (if	known) 18-17780E	ELF13
					_	Column A Debtor 1	Column B Debtor 2 or non-filing spous	
6.	Net	income from rental and other r	eal property					
			Debtor 1	Debtor 2				
		ss receipts (before all uctions)	\$0.00					
		inary and necessary operating - enses			Сору			
		monthly income from rental or er real property	\$0.00		here →	\$0.00		
7.	Inte	rest, dividends, and royalties				\$0.00		
8.	Une	employment compensation				\$0.00		
		not enter the amount if you conte efit under the Social Security Act						
	F	For you		\$1,244.0	00			
	F	For your spouse						
9.		asion or retirement income. Do a benefit under the Social Secur		ount received that		\$0.00		
	or p	ount. Do not include any benefits ayments received as a victim of a nternational or domestic terrorism arate page and put the total below	a war crime, a crime If necessary, list o	against humanity	,			
	Tota	al amounts from separate pages,	if any.		 +		+	
	Add The	culate your total average month I lines 2 through 10 for each colur n add the total for Column A to th	mn. ne total for Column E			\$3,468.00	+	Total average monthly income
Pa	art 2	Determine How to M	easure Your De	eductions fron	n Incom	е		
12.	Cop	by your total average monthly in	ncome from line 11					\$3,468.00
13.	Cal	culate the marital adjustment.	Check one:					
		You are not married. Fill in 0 be You are married and your spous You are married and your spous Fill in the amount of the income of you or your dependents, such than you or your dependents. Below, specify the basis for exc necessary, list additional adjusting this adjustment does not apply	se is filing with you. se is not filing with you listed in line 11, Col n as payment of the luding this income a ments on a separate	ou. lumn B, that was I spouse's tax liabil and the amount of	ity or the s	spouse's suppor	t of someone other	÷
14.	You	Totalr current monthly income. Sub				\$0.00 Co	py here →	- \$0.00

Deb	otor 1	Arlene Glover Case number (if known) 18-1778	0ELF13		
15.	Calc	ulate your current monthly income for the year. Follow these steps:			
	15a.	Copy line 14 here 😝	\$3,468.00		
		Multiply line 15a by 12 (the number of months in a year).	X 12		
	15b.	The result is your current monthly income for the year for this part of the form.	\$41,616.00		
16.	Calc	ulate the median family income that applies to you. Follow these steps:			
	16a.	Fill in the state in which you live. Pennsylvania			
	16b.	Fill in the number of people in your household.			
	16c.	Fill in the median family income for your state and size of household	\$65,060.00		
17.	How	do the lines compare?			
	17a.	under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Offici	al Form 122C-2).		
	17b.	Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is deteid 11 U.S.C.</i> § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form On line 39 of that form, copy your current monthly income from line 14 above.			
P	art 3:	Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)			
18.	Сору	your total average monthly income from line 11.	\$3,468.00		
19.	that c	act the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's ne, copy the amount from line 13.			
	19a.	If the marital adjustment does not apply, fill in 0 on line 19a.	– \$0.00		
	19b.	Subtract line 19a from line 18.	\$3,468.00		
20.	Calc	ulate your current monthly income for the year. Follow these steps:			
	20a.	Copy line 19b	\$3,468.00		
		Multiply by 12 (the number of months in a year).	X 12		
	20b.	The result is your current monthly income for the year for this part of the form.	\$41,616.00		
	20c.	Copy the median family income for your state and size of household from line 16c.	\$65,060.00		
21.	How	do the lines compare?			
	_	Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, <i>The commitment period is 3 years</i> . Go to Part 4.			
	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4.				

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Debtor 1	Arlene Glover	Case number (if known) 18-17780ELF13
Part 4:	Sign Below	
By sign	ning here, under penalty of perjury I declar	e that the information on this statement and in any attachments is true and correct.
X /s/	Arlene Glover	X
Arle	ene Glover, Debtor 1	Signature of Debtor 2
Dat	te_12/11/2018	Date
	MM / DD / YYYY	MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Underlying Allowances (as of 11/27/2018)

In re: Arlene Glover Case Number: 18-17780ELF13

		-	
Chapte	er:	13	

Median Income Information			
State of Residence	Pennsylvania		
Household Size	2		
Median Income per Census Bureau Data	\$65,060.00		

National Standards: Food, Clothing, Household Supplies, Personal Care, and Miscellaneous				
Region	US			
Family Size	2			
Gross Monthly Income	\$3,468.00			
Income Level	Not Applicable			
Food	\$646.00			
Housekeeping Supplies	\$64.00			
Apparel and Services	\$142.00			
Personal Care Products and Services	\$69.00			
Miscellaneous	\$281.00			
Additional Allowance for Family Size Greater Than 4	\$0.00			
Total	\$1,202.00			

National Standards: Health Care (only applies to cases filed on or after 1/1/08)				
Household members under 65 years of age	Household members under 65 years of age			
Allowance per member	\$52.00			
Number of members	0			
Subtotal	\$0.00			
Household members 65 years of age or older				
Allowance per member	\$114.00			
Number of members	0			
Subtotal \$0.00				
Total	\$0.00			

Local Standards: Housing and Utilities			
State Name	Pennsylvania		
County or City Name	Philadelphia County		
Family Size	Family of 2		
Non-Mortgage Expenses	\$606.00		
Mortgage/Rent Expense Allowance	\$919.00		
Minus Average Monthly Payment for Debts Secured by Home	\$542.00		
Equals Net Mortgage/Rental Expense	\$377.00		
Housing and Utilities Adjustment	\$0.00		

Underlying Allowances (as of 11/27/2018)

In re: Arlene Glover Case Number: 18-17780ELF13

Chapter: 13

Local Standards: Transportation; Vehicle Operation/Public Transportation						
Transportation Region		Philadelphia				
Number of Vehicles Operat	red	0	0			
Allowance		\$178.00	\$178.00			
Loc	Local Standards: Transportation; Additional Public Transportation Expense					
Transportation Region		Not applicable				
Allowance (if entitled)		Not applicable	Not applicable			
Amount Claimed		Not applicable	Not applicable			
	Local Standards: Transpo	rtation; Ownersl	nip/Lease Expense			
Transportation Region		Philadelphia	Philadelphia			
Number of Vehicles with Ov	wnership/Lease Expense	0				
	First Car		Second Car			
Allowance						
Minus Average Monthly Payment for Debts Secured by Vehicle						
Equals Net Ownership / Lease Expense						